	F 4.		0	
ب.	UTILITY	Attorney Docket	No. 35.G2788	
jc860	PATENT APPLICATION		First Named Inventor or Application Identifier	
	TRANSMITTAL	SATOSHI KURO	DYANAGI	
S	(Only for new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Lab	bel No.	
	APPLICATION ELEMENTS see MPEP chapter 600 concerning utility patent application contents.	ADDRES	Commissioner for Patents Box Patent Application Washington, DC 20231	
1.	Fee Transmittal Form (Submit an original, and a duplicate for fee processing)		CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i>	
2.	Applicant claims small entity status. See 37 CFR 1 27		Nucleotide and/or Amino Acid Sequence Submission if applicable, all necessary)	
3.	X Specification Total Pages 47		a. Computer Readable Form (CRF)	
4.	X Drawing(s) (35 USC 113) Total Sheets 24	ł	b. Specification Sequence Listing on i. CD-ROM or CD-R (2 copies); or	
157 <u>.</u>	X Oath or Declaration Total Pages 1		ii. paper	
Will Built Bu	a. X Newly executed (original or copy)	•	c. Statements verifying identity of above copies	
	a		ACCOMPANYING APPLICATION PARTS	
mail mail	b. Copy from a prior application (37 CFR 1.63(d)) (for continuation/divisional with Box 17 completed)	9. X	Assignment Papers (cover sheet & document(s))	
20 100 20 20 100 20 20 100 20 20 100 20 20 100 20 20 100 20 20 100 20 20 100 20 20 100 20	i		37 CFR 3.73(b) Statement (when there is an assignee)	∍y
111	inventor(s) named in the prior application, s 37 CFR 1.63(d)(2) and 1.33(b).	see 11.	English Translation Document (if applicable)	
6	Application Data Sheet. See 37 CFR 1.76	12.	Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations	
1.6		13.	Preliminary Amendment	
Tenji Him		14. X	Return Receipt Postcard (MPEP 503) (Should be specifically itemized)	
i.i.		15.	Certified Copy of Priority Document(s) (if foreign priority is claimed)	
		16.	Other:	
H	7. If a CONTINUING APPLICATION, check appropriate box and sup	ply the requisite info	formation:	
		n-in-part (CIP)	of prior application No/ Group/Art Unit:	
1	For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of considered a part of the disclosure of the accompanying continuation or divis	sional application an	nd is hereby incorporated by reference. The incorporation can), is only
L	pe relied upon when a portion has been inadvertently omitted from the subm	nitted application par	rts.	
\vdash	i 18. CORRES	SPONDENCE ADDR 05514	NEOS	
	X Customer Number or Bar Code Label (Insert Customer No.		abel here) or Correspondence address below	

State

Telephone

Zip Code

Fax

NAME

Address

Country

City

-	_
1	_
- 1	1
- 1	

IMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RA	\TE	(5) CALCULATIONS
	OTAL CLAIMS 7 CFR 1.16(c))	30-20 =	10	X \$ 18 00	=	\$ 180 00
İŅĪ	DEPENDENT _AIMS (37 CFR 1.16(b))	11-3 =	8	X \$ 80.00	=	\$ 640.00
ML	ULTIPLE DEPENDEN	T CLAIMS (if applicable) (37	CFR 1.16(d))	\$270.00	=	\$
					SIC FEE FR 1.16(a))	\$ 710 00
			Total of	above Calcı	ılations =	\$ 1530.00
Reduction by 50% for filing by small entity (Note 37 CFR 1.9, 1.27, 1.28).						
					TOTAL =	\$ 1530.00
	I entity status					
a. b.	A small en A small en and desire	ntity statement is enclose ntity statement was filed ed. per claimed.				
a.	A small er A small er and desire		in the prior nonprovision	nal applicatio		
a. b. c. X	A small en A small en and desire Is no long A check in the amo	ntity statement was filed ed. per claimed. punt of \$ 1530.00 to punt of \$ 40.00 to	in the prior nonprovision cover the filing fee is er cover the recordal fee i	nal application	on and su	ch status is still prope
a. b. c. X The C	A small en A small en and desire Is no long A check in the amo A check in the amo Commissioner is hereb	ntity statement was filed ed. per claimed. punt of \$ 1530.00 to	in the prior nonprovision cover the filing fee is er cover the recordal fee i erpayments or charge the	nal application	on and su	ch status is still prope
a. b. c.	A small er A small er and desire Is no long A check in the amo	ntity statement was filed ed. per claimed. punt of \$ 1530.00 to	in the prior nonprovision cover the filing fee is er	nal applicatio		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED			
NAME	Shawn W. Fraser - Reg. No. 45,886		
SIGNATURE	Shawm W. Sharey		
DATE	April 17, 2001		